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EAST HERTFORDSHIRE COMBINED DISTRICTS
BRAUGHING RURAL DISTRICT COUNCIL



ANNUAL REPORT

of the

MEDICAL OFFICER OF HEALTH

including the report of the

PUBLIC HEALTH INSPECTOR

FOR THE YEAR 1968

AUGUST 1969

BRIDGEFOOT HOUSE,
BUNTINGFORD.

BRAUGHING RURAL DISTRICT COUNCIL.

Annual Report on the Health of the District for the year 1968.

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EAST HERTFORDSHIRE COMBINED DISTRICTS.

REPORT OF THE MEDICAL OFFICER OF HEALTH FOR THE YEAR 1968.

B R A U G H I N G R U R A L D I S T R I C T .

P R E F A C E .

To the Chairman and Members of the
Public Health Committee.

Mr. Chairman, Ladies and Gentlemen,

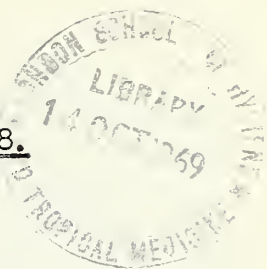
I have the honour to present the Annual Report of the Rural District Council of Braughing for the year ending 31st December, 1968.

Before coming to the Braughing portion of the report I propose to comment upon the Health and Welfare Services of the County Council and their relationship to the Public Health Services of the East Herts Combined Districts.

What are known as the major or local Health Authorities - these being County Councils and County Borough Councils - administer the Personal Health Services. Their responsibilities under Part III of the National Health Service Act, 1946, paras. 21-29, include the provision of Health Centres, the care - including dental care - of expectant and nursing mothers and children under five who are not attending primary schools, the provision of domiciliary midwives, health visitors, home nurses, immunisation, ambulance services, the prevention of illness, the care and after-care of persons suffering from illness or mental sub-normality, and the service of domestic helps. The County is also responsible for the School Medical Service and Health Education.

It would be impossible for the County Medical officer of a populous County like Hertfordshire to undertake the personal supervision of all these responsibilities and in consequence the County is split into Divisions, of which there are six in Hertfordshire, and at the head of each is a Divisional Medical Officer who carries out delegated functions.

On the other hand, minor or local Sanitary Authorities also known as County Districts, these being Municipal Boroughs, Urban District and Rural District Councils, are responsible for the Environmental Health Services such as housing, the declaration of unfit houses, sanitation - including the supervision of water supplies, sewage and refuse tips - noise abatement, clean air, enforcement of the Food & Drugs Act, 1955, with the inspection of food premises, the supervision of agricultural safety and health, enforcement of the Clean Air Act and the Prevention of Damage by Pests Act, as well as the Offices, Shops and Railway Premises Act. Responsibility for the control of infectious diseases, as well as health education where practicable, rests with the minor authorities. It must be stated that County Boroughs are responsible for both the Personal and Environmental Health Services.





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All these authorities, known as District Councils, must have a Medical Officer of Health, but a number may join together to share the services of a M.O.H. Each District has its own or several Public Health Inspectors. The East Herts Combined Districts were formed a number of years ago, and over the past twelve years or so have comprised Hertford Borough, Hoddesdon, Ware and Sawbridgeworth Urban Districts, and Braughing and Ware Rural Districts. In 1968 the Mid-year (estimated) population of the Combined Districts amounted to 84,100.

When, in the autumn of 1968, I was appointed Divisional Medical Officer for the East Herts Division of the County Council, I had in addition to the duties as Medical Officer of Health East Herts Combined Districts, to undertake County Council functions for the whole of East Herts, which as well as the six Districts set out above, includes Bishop's Stortford and Cheshunt Urban Districts together with Hertford Rural District, each of which has its own Medical Officer of Health. The total (estimated) population of East Herts adds up to 160,530. I may add that as well as carrying out their County Council functions all the other Divisional Medical Officers in Hertfordshire are Medical Officers of Health of their constituent Districts.

There has latterly been uneasiness concerning the future of the Public Health Service as it is now constituted. The publication of the Seebohm Report on Local Authority and Allied Personal Social Services, the Green Paper on Administrative Structure of the Medical and Related Services in England & Wales (since withdrawn but with the promise of an Amended Green Paper in the future) and last but not least, the anticipated publication of the recommendations of the Royal Commission on Local Government, all lead to the belief that widespread changes are imminent, even though it may take time for them to be implemented. How these will affect the Service is still a matter for conjecture but the sense of uncertainty as to the future working and organisation of the Public Health Service is bound to be unsettling.

I am happy to report that the health of the Braughing Rural District for 1968 was such as to invite little except favourable comment. The population increase of 1967 was maintained with a slight increase, the total figure rose to 10,740. There was a small increase in the total of live births. Longevity is no new phenomenon in this area, but it is a fact worthy of comment that out of 105 deaths there were 58 over the age of 75 and as many as 80 from the age of 65 upwards.

During the year, the Council lost the services of its Public Health Inspector, Mr. M.R. Gibbs, on his obtaining the post of Public Health Inspector and Port Health Inspector at Newhaven. I wish him every success in his new appointment. He was succeeded by Mr. P.E.L. Reed who came to us from Chesterton in Cambridgeshire, who has every good wish for an equally successful stay in this District.

I am grateful to the Public Health Committee, the Council and their Chairmen for their continued interest in the Health affairs of the District, to Mr. Reed who, since his appointment has shown great zeal and enthusiasm for his duties and also Miss Kent who has, as usual, prepared the statistical figures for this report. I wish to thank the other Chief Officers for their help and support.

I am,
Mr. Chairman, Ladies and Gentlemen,
Your obedient servant,
GORDON M. FRIZELLE.

PUBLIC HEALTH DEPARTMENT - STAFF.

MEDICAL OFFICER OF HEALTH

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Certificate of Radiological Protection.

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(East Herts. Combined Districts)

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Deputy (Part-Time) Medical Officer of Health.

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Telephone

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Home

Hoddesdon 62040

Hoddesdon 62614

Public Health Inspector.

M.R. Gibbs, M.R.S.H., M.A.P.H.I., to September, 1968.
P.E.L. Reed, M.R.S.H., M.A.P.H.I., from November, 1968.

Clerical Duties in the Public Health Department were carried
out by Miss D. Kent.

Public Health Department :

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BUNTINGFORD, Herts.

Telephone

:

Buntingford 315/6.

PUBLIC HEALTH COMMITTEE.

The Public Health Committee for the year 1968/9 was composed of the
following Members :-

Chairman : Mr. H. Crocker.

Vice-Chairman : Mr. J. A. Reynolds.

Capt. C.G.E. Barclay.

Mr. E. F. Burt

Mrs. C. Gorna-Davies

Mr. L. C. Holmans

Mrs. G. M. Holmes

Mr. A. R. Mabey

Mr. L. C. Mason

Mr. W. S. Pimblett

Mr. H. G. Poole

Mr. H. G. Prime

Mr. D. N. V. Smith

Mr. S. E. Thody

Mr. A. Vandome

Mr. C. P. Wilson.

SECTION "A".

GENERAL STATISTICS 1968.

The information furnished to each Medical officer of Health for the purpose of his Annual Report consists of :-

- (a) A mid-year estimate of the population of his area.
- (b) Number of births and deaths in his area, after making allowance for those transferable.
- (c) Causes of death distinguished by sex and age.

From the figures of births and deaths the M.O.H. is then able to calculate the various rates which are required to be stated in his report.

As a number of terms are used which may not be understandable to those not versed in statistics, it is felt that some description of them and how the figures are arrived at may be desirable.

Crude Death Rate

The Crude death rate of an area represents the number of deaths registered during the year as belonging to that area, after correction for transfers to the place of residence of the deceased, per 1,000 of the corresponding estimated population at the middle of the year. Thus the calculation involved is :-

$$\frac{\text{No. of deaths registered in the year} \times 1000}{\text{Mid-year population.}}$$

Standardised Death Rate.

Urban areas, being for the most part industrial centres, have a higher proportion of people living in the middle-age periods of life, ages at which the death rates are low; and rural areas have a greater number of old people. Some correction must be made for these irregularities of distribution as regards age and sex, otherwise the death rates will not afford an accurate means of comparing the healthiness of one district with another. The death rate so adjusted is known as the Standardised Death Rate.

Comparability Factor.

The Standardised Death Rate is arrived at by multiplying the Crude Death Rate or Mortality Rate by the Comparative Mortality Index for the area by a figure supplied by the Registrar General.

Maternal Mortality Rate.

This depends upon the following calculation :-

$$\frac{\text{No. of deaths of women classed as pregnancy or childbirth} \times 1,000}{\text{Total live and still births.}}$$

Infant Mortality Rates.

These are obtained by employing the following :-

$$\frac{\text{Total deaths of infants under one year} \times 1,000}{\text{Total live births}}$$

$$\frac{\text{Legitimate infant deaths under one year} \times 1,000}{\text{Total legitimate live births}}$$

*
$$\frac{\text{Illegitimate infant deaths under one year} \times 1,000}{\text{Total illegitimate live births.}}$$

Live Birth Rate

Here the relevant calculation is :-

$$\frac{\text{Total live births in the year} \times 1,000}{\text{Mid-year population.}}$$

Illegitimate Live Birth Rate

This differs from previous calculations in that it is expressed as a percentage, i. e. :-

$$\frac{\text{Total Illegitimate Live Births} \times 100}{\text{Total live births.}}$$

Stillbirth Rate.

The ratio of births at or over 28 weeks' gestation which were not live born per 1,000 live and still births.

Neo-natal Mortality Rate

This is the ratio of deaths among live born infants under four weeks of age per 1,000 live births. This can be sub-divided into -

- (a) Early Neo-natal death rates, relating to deaths in the first week of life, and
- (b) Late Neo-natal death rates, relating to infants over one week but under four weeks

Peri-natal Mortality Rate.

A rate that combines the stillbirths and deaths under one week per 1,000 total live and still births, i.e. :-

$$\frac{\text{Stillbirths and deaths under 1 week} \times 1,000}{\text{Total live and stillbirths.}}$$

Peri-natal Mortality Rate (Continued).

It is obvious therefore, that a rate is a figure derived from an arithmetical formula, not a statement of the number of particular cases occurring, or even this number expressed as a percentage. This can give rise to bewilderment in people reading reports, especially from the smaller communities where the number of individual cases is meagre. One can imagine a personsaying "Here it states that there was only one death of anillegitimate child, yet it goes on to say that the Illegitimate Death Rate was 71.43. This must be wrong."

*

Table 1

(Figures for 1967 are shown in brackets).

POPULATION.

Estimated Mid-Year Population of Braughing Rural District.

10,740 (10,570)

GENERAL STATISTICS.

Area in Acres ... 45,570.

Number of Inhabited Houses according to Rate Books.

3,604 (3,491)

Number of Houses per acre ... 0.08

Number of Persons per acre ... 0.24

Number of Persons per house ... 2.98

Rateable Value of District £461,450.

Sum Represented by a Penny Rate £1,907.

VITAL STATISTICS.

Table 2.

(Figures for 1967 shown in brackets.)

<u>LIVE BIRTHS.</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>
Legitimate	105 (80)	62 (69)	167 (149)
Illegitimate	5 (4)	9 (3)	14 (7)
Total Live Births	110 (84)	71 (72)	181 (156)
Live Birth Rate per 1000 Population	16.9	(14.8)	
Area Comparability Factor for births	1.14	(1.14)	
Standardised Live Birth Rate per 1000 population	19.20	(16.82)	
Illegitimate Live Births per cent of total Live Births.	7.73	(4.48)	
<u>STILL BIRTHS.</u>			
Legitimate	1 (1)	1 (2)	2 (3)
Illegitimate	- -	- -	- -
Total Still Births	1 (1)	1 (2)	2 (3)
Still Birth Rate per 1000 total Live and Still Births	11.00	(18.86)	
<u>TOTAL LIVE AND STILL BIRTHS.</u>			
Legitimate	106 (81)	63 (71)	169 (152)
Illegitimate	5 (4)	9 (3)	14 (7)
Total Live and Still Births	111 (85)	72 (74)	183 (159)
<u>COMPARISON RATES.</u>	<u>Braughing Rural District</u>	<u>Hertford County</u>	<u>England & Wales</u>
Live Birth Rate	16.9	16.2	16.9
Area Comparability Factor	1.14	0.9	-
Standardised Birth Rate	19.20	15.2	-
Still Birth Rate	11.00	12.8	14.00

Vital Statistics.
Table 2 Continued.

<u>INFANT DEATHS.</u>	<u>Male.</u>	<u>Female.</u>	<u>Total.</u>
Infants under one week, Total	3 (-)	- (-)	3 (-)
Legitimate	3 (-)	- (-)	3 (-)
Illegitimate	- (-)	- (-)	- (-)
Infants under four weeks, Total	3 (-)	- (-)	3 (-)
Legitimate	3 (-)	- (-)	3 (-)
Illegitimate	- (-)	- (-)	- (-)
Infants under one year, Total	3 (2)	- (-)	3 (2)
Legitimate	3 (1)	- (-)	3 (1)
Illegitimate	- (1)	- (-)	- (1)

INFANT MORTALITY RATES

Infant Mortality Rate per 1000 total live births.	16.57	(12.82)
Legitimate infant deaths per 1000 legitimate live births	17.96	(6.71)
Illegitimate infant deaths per 1000 illegitimate live births	00.00	(142.8)
Neo-Natal Mortality Rate (deaths of infants under four weeks) per 1000 total live births.	16.57	(00.00)
Early Neo-Natal Mortality Rate (deaths of infants under one week) per 1000 total live births.	16.57	(00.00)
PeriNatal Mortality Rate (Still births and deaths of infants under one week combined) per 1000 live and still births.	27.32	(6.41)

MATERNAL DEATHS.

Maternal deaths including abortions	-	(-)	-	(-)
Maternal mortality Rate per 1000 live and still births	00.00		(00.00)	

DEATHS.

Deaths of all ages	Males	63	(49)
	Females	42	(49)
	Total	105	(98)
Death Rate per 1000 population		17.00	(9.3)
Area Comparability Factor for Deaths.		0.99	(0.97)
Standardised Death Rate per 1000 population.		9.67	(8.99)

COMPARISON RATES.

	<u>Braughing</u> <u>Rural District</u>	<u>Hertford</u> <u>County</u>	<u>England</u> <u>& Wales.</u>
Infant Mortality Rate	16.57	16.2	18.0
Legitimate	11.97	15.4	-
Illegitimate	-	26.3	-
Neo-Natal Mortality Rate	16.57	11.1	12.4
Early Neo-Natal Mortality Rate	16.57	9.9	10.5
Perinatal Mortality Rate	27.00	22.6	25.0
Maternal Mortality Rate	00.00	0.1	0.2
Death Rate	9.77	9.5	11.9
Area Comparability Factor	0.99	1.1	-
Standardised Death Rate	9.67	10.7	-

PREVALENCE OF, AND CONTROL OVER INFECTIOUS DISEASES.

Notifiable Diseases (Other than Tuberculosis) notified during the Year.

Disease	Total all ages for the year	Under 1	1-	5-	15-	25-	Over 65-	Not known.
Scarlet Fever	7	-	1	6	-	-	-	-
Whooping Cough	3	-	1	2	-	-	-	-
Measles	44	2	25	15	1	1	-	-
Pneumonia	2	-	-	-	-	1	1	-
Dysentery	1	-	-	1	-	-	-	-
Infective Jaundice	6	-	1	3	1	1	-	-
Food Poisoning	6	-	2	-	1	2	1	-



INCIDENCE OF DISEASE DURING THE DIFFERENT MONTHS.

	First Quarter			Second Quarter			Third Quarter			Fourth Quarter		
	Jan.	Feb.	Mar.	Apr.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.
Scarlet Fever	-	1	-	-	-	-	-	-	-	1	3	2
Whooping Cough	1	-	-	-	-	-	2	-	-	-	-	-
Measles	-	1	5	-	1	11	8	2	1	7	5	3
Pneumonia	2	-	-	-	-	-	-	-	-	-	-	-
Dysentery	-	-	-	-	-	-	-	-	1	-	-	-
Infective Jaundice	1	-	-	-	-	-	1	-	-	3	-	1
Food Poisoning	-	-	-	-	-	-	-	-	6	-	-	-

DISTRIBUTION OF NOTIFIED INFECTIOUS DISEASES AMONG THE DIFFERENT PARISHES.

PARISH.	Scarlet Fever	Whooping Cough	Measles	Dysentery	Pneumonia	Infective Jaundice	Food Poisoning.
Albury	-	-	1	-	-	-	-
Anstey	-	2	-	-	-	-	-
Aspenden	-	-	2	-	-	-	-
Ardeley	-	-	1	-	-	-	-
Braughing	-	-	22	-	-	1	-
Brent Pelham	-	-	-	-	-	-	-
Buckland	-	-	-	-	-	-	-
Buntingford	-	-	4	-	-	-	-
Cottered	-	-	-	-	-	-	-
Furneux Pelham	-	-	-	-	-	-	-
Hormead	-	-	1	-	-	-	-
High Wych	-	-	2	-	-	-	-
Little Hadham	-	-	3	-	1	4	6
Meesden	-	-	-	-	-	-	-
Much Hadham	7	-	8	1	1	1	-
Stocking Pelham	-	-	-	-	-	-	-
Thorley	-	1	-	-	-	-	-
Westmill	-	-	-	-	-	-	-
Wyddial	-	-	-	-	-	-	-

T U B E R C U L O S I S during 1968.

Tuberculosis New cases only	Total all ages	Under 5 years	5 to 14	15 to 24	25 to 44	45 to 64	65 and over	Age not known
Respiratory	1	-	-	-	-	-	1	-
Meninges & C.N.S.	-	-	-	-	-	-	-	-
Other	1	-	-	-	-	1	-	-

<u>Tuberculosis</u> All cases		Total	Males		Females	
			P.	N.P.	P.	N.P.
Cases on Register on 31st December, 1967.		60	24	9	17	10
Cases added to Register.	New cases	2	1	-	-	1
	Inward Transfers	-	-	-	-	-
	Restored to Register.	-	-	-	-	-
Cases removed from Register	Deaths	-	-	-	-	-
	Outward Transfers	-	-	-	-	-
	Patients Cured	1	-	1	-	-
	Others *	43	17	7	14	5
Cases remain- ing on Register 31st December, 1968.		18	8	1	3	6

* Removed when Register checked with Clinics.

CAUSE OF DEATHS DURING THE YEAR 1968.

	M.	F.
ALL CAUSES	63	42
Malignant Neoplasm - lung, bronchus	5	0
" " - breast	0	2
" " - uterus		2
Other malignant neoplasms, etc.	10	6
Diabetes Mellitus	1	0
Anaemias	0	2
Other diseases of Nervous System, etc.	0	1
Chronic Rheumatic Heart Disease	0	2
Hypertensive Disease	0	2
Ischaemic Heart Disease	18	9
Other forms of Heart Disease	2	1
Cerebrovascular Disease	8	3
Other Diseases of the Circulatory System	2	1
Influenza	0	1
Pneumonia	5	5
Bronchitis and Emphysema	4	0
Other Diseases of Respiratory System	1	1
Peptic Ulcer	2	0
Other Diseases of Digestive System	0	1
Congenital Anomalies	2	0
Birth Injury, Difficult Labour, etc.	1	0
Symptoms and Ill-defined Conditions	0	2
Motor Vehicle Accidents	1	0
All Other Accidents	0	1
Suicide and Self-Inflicted Injuries.	1	0
(a) Still Births	1	1
(b) Deaths of infants under four weeks of age	3	-
(c) " " " " one year of age	3	-
(d) " " " " one week of age	3	-

GENERAL STATISTICS.

The year 1968 showed a further increase in the population figures of the District with a total of 10,740, while the 1967 figure was 10,570. This gave an increase of 170 compared with the previous year's 130. This increase was made up of an inward migration of 94 and a natural increase of 76.

The number of inhabited houses rose from 3,491 to 3604, the number of houses per acre from 0.23 to 0.24. On the other hand the number of persons per house fell from 3.28 to 2.98. It is obvious that there is no overcrowding in the District.

VITAL STATISTICS.

There was a rise in the total number of live births from 156 to 181, the number of male births greatly exceeding the number of female births. The live birth rate was 16.9 compared with 16.2 for the County and 16.9 for England & Wales.

The still births fell from 3 to 2, the deaths in infants under 1 year of age remained at 3; once again there was no maternal deaths.

Deaths at all ages increased from 98 to 105 giving a standardised death rate of 9.67 compared with 10.7 for the County.

CAUSES OF DEATH.

Diseases of the heart and blood vessels again accounted for the greatest number of deaths, there being 37. Out of these 37, 27 were due to Coronary Disease of whom 21 were over the age of 65.

Malignancy was the second highest cause of death, with 25 cases, 5 of whom were due to cancer of the lung. All of these were over the age of 65.

Third on the list were vascular lesions of the nervous system with 11 deaths, all but one being over the age of 65. Pneumonia accounted for 10 deaths, while there were 4 deaths due to bronchitis and emphysema.

There was one death due to a motor accident, one accidental death due to carbon monoxide poisoning and one accidental death following a fall. One suicide due to a gunshot wound. One death in a man aged 81 was due to multiple injuries of unknown cause. Three deaths in children under 1 year were caused by congenital abnormalities (2) and Neo-Natal Anoxia.

There were 22 deaths in the 65-74 age group, while deaths in persons over the age of 75 numbered 58. Thus, out of a total of 105, there were 80 deaths over the age of 65.

INFECTIOUS DISEASE.

There was a slight outbreak of measles numbering 44 cases, the majority of cases occurring during June, July and October. Unfortunately there were 6 cases of food poisoning early in September. Owing to various factors, including postal delays, it was difficult to follow these up with any degree of accuracy. Only one faecal specimen was obtained and this was negative. By the time further investigations could be undertaken all the patients concerned had fully recovered.

ANTHRAX.

In the Spring 2 cases of Anthrax were diagnosed in cows. . The animal carcasses were destroyed by burning and the human contacts were given prophylactic doses of penicillin.

TUBERCULOSIS.

A careful search of the Tuberculosis Register was instituted during the year. This was undertaken because it was apparent that a number of cases were transferred automatically from one year's register to the next without a close follow-up. The results tabulated on Page 15 show how necessary this check has proved.

MASS X-RAY UNIT.

The Mass X-Ray Unit from the East Anglian Regional Hospital Board, visited Buntingford from the 25th to 28th November 1968. The attendances were as follows :-

HEALTH CENTRE.

<u>Number</u>	<u>M.</u>	<u>F.</u>	<u>TOTAL.</u>	<u>Area of Domicile</u>		
				<u>M.</u>	<u>F.</u>	<u>TOTAL.</u>
Attended for X-Ray.	182	304	486	-	1	1 Cambridge.
Attended for first	134	235	369	1	1	2 Essex.
time				180	302	482 Herts
				1	-	1 Beds.
				<u>TOTAL</u>		<u>486</u>

J. SAINSBURY LTD.

Attended for X-Ray	220	67	287	255	Herts.
Attended for first					
time			127		

No Pulmonary Tuberculosis was discovered but one case of Bronchial Carcinoma and 11 Cardiac conditions were found. The patients' General Practitioners were informed.

OLD PEOPLE'S WELFARE.

Two persons who have been reported upon over a number of years have been visited.

Miss A.P.

This old lady who will be 98 in June 1969, still remains reasonably alert mentally. Her physical condition is, however, deteriorating and she does not look forward to the advent of another winter.

Miss K.M.

Now aged 75. Has been in Western House Hospital for approx. 9 years. She cannot walk because of severe arthritis, but her hand movements are unimpaired. Is occasionally a trifle confused mentally.

NATIONAL ASSISTANCE ACTS 1948 and 1951.

Fortunately it was unnecessary to take any action under Section 47 of these Acts.

MEALS ON WHEELS.

The following meals were supplied by the W.R.V.S. during 1968 :-

Buntingford	3305
Much Hadham	3243
Thorley	102
High Wych	190

The Gilston W.R.V.S. supplied High Wych parish as well and the Bishop's Stortford W.R.V.S. supplied Braughing R.D.C's part of Thorley parish.

BUILDING.

During the year 188 buildings were erected by private enterprise ; no new buildings were erected by the Council.

REPORTS.

The following special reports were made to the Public Health Committee during the year :- The Public Health Infectious Diseases Regulations 1968, Annual Conference of the Royal Institute of Public Health and Hygiene, Possible Hazards in Coin-Operated Dry Cleaning, The Abortion Act, 1967 and Air Pollution from Road Vehicles.

SECTION "B."

GENERAL PROVISION OF HEALTH SERVICES FOR BRAUGHING RURAL DISTRICT.

LABORATORY SERVICE.

Laboratory facilities are provided by the Public Health Laboratory Service at Cambridge.

In emergency medical specimens may be examined at the Laboratory of the Hertford County Hospital, Hertford or the Herts. and Essex General Hospital, Bishop's Stortford.

COUNTY COUNCIL HEALTH AND WELFARE SERVICES.

The following County Council Services under the National Health Service Act, 1946, are available for the Braughing Area. Full details can be obtained from the County Medical Officer, County Hall, Hertford.

Vaccinations against Smallpox, Diphtheria, Whooping Cough, Tetanus and Poliomyelitis.

Babies may be immunised against these diseases at the Welfare Centres and Family Doctors will also provide a similar service.

The following Table gives the latest recommendations :-

2 - 6 months	Diphtheria Whooping Cough Tetanus)))	3 injections
6 -10 months	Poliomyelitis		3 doses oral vaccine. This may be given at the same time as the triple injection if the procedure is started at 3 months.
1 - 2 years	Smallpox and Measles Vaccination.		
15-18 months	Reinforcing Diphtheria Whooping Cough Tetanus)))	Injection
5 years	Reinforcing Oral Polio Diphtheria Tetanus)))	Injection
9 - 12 years.	Smallpox Revaccination.		
13 years.	B.C.G. Vaccination against Tuberculosis		

Immunisation & Vaccination. (Continued).

As far as the routine immunisation of children is concerned, birth notification of children in the County has been processed by computer and in consequence it has been possible to send out an appointment for every child to attend a Clinic or its own Doctor for immunisations as they have become due. This scheme was introduced in East Herts in January 1968.

It must be borne in mind that a traveller entering certain countries must produce an International Certificate of Vaccination against Smallpox, Yellow Fever and Cholera. International Certificates should be procured from the travel agency when the intending traveller makes his booking.

Vaccination is done by the patient's own Doctor, who must enter on the Certificate particulars of the vaccine employed. The Doctor's signature must then be authenticated at the local - not the County - Health Department, which holds facsimiles of all signatures of Doctors in the District.

On the other hand, immunisation against Yellow Fever must be carried out at one of the following Centres, after an appointment is first made by telephone :-

<u>Address :</u>	<u>Tel. No.</u>	<u>Time of Attendance.</u>
Yellow Fever Vaccination Service, Hospital for Tropical Diseases, 4, St. Pancras Way, LONDON. N.W.1.	Euston 4411 Ext. 137.	Monday to Friday mornings.
Yellow Fever Vaccination Service, Medical Dept., Unilever House, Blackfriars, LONDON.E.C.4.	Fleet St. 7474. Ext. 2841.	Tuesday and Friday 3.45 p.m.
Yellow Fever Vaccination Service, 53, Great Cumberland Place, LONDON. W. 1.	Ambassador 6456	Monday to Friday 9.30 - 10.30 a.m. Tuesday, Wednesday and Thursday 1.30 - 2.30 p.m.

Protection against Cholera may be obtained from the traveller's own Doctor and is advisable for persons undertaking journeys in the Middle or Far East. Advice may be obtained from the Embassy or Mission of the country concerned.

Smallpox has an incubation period of 14 days. Protection becomes valid 8 days after vaccination and lasts for three years.

Yellow Fever has an incubation period of 6 days. Protection becomes valid 10 days after immunisation and lasts ten years.

Immunisation and Vaccination (Continued).

Cholera has an incubation period of 5 days. Protection becomes valid 6 days after immunisation and lasts for six months.

Typhoid Fever is endemic in some countries and may be contracted by travellers in mediterranean areas. I would here reiterate the advice given in previous Annual Reports that anyone proposing to spend holidays in such regions ought, for their own sakes and for the sake of others, to seek protection from T.A.B. immunisation. This should not be left to the last moment, as the interval between the first and second doses should be at least four weeks and preferably six weeks, because of the delay in building up effective immunity.

Medical Recruitment.

The Public Health Services throughout the County have for years been starved of suitable entries at the Assistant County Medical Officer level. There have been various factors responsible for this, one being the unattractive salaries offered, another being the drain on medical man-power caused by emigration, while more recently the complete uncertainty as to the whole future of Local Government has made Public Health as a career something to be avoided.

Home Help Service.

This service, which is a permissive one under the National Health Service Act, was started during the last war to assist young mothers and old people who had been obliged to leave their homes. It is now an essential part of Local Health Authority service and is a major support for the older sick and infirm.

Unfortunately the Home Help Service is under considerable strain, due to insufficient staff, as other forms of employment in industry offer many counter attractions. Any person anxious to be of assistance to either the old and infirm, or to mother and child, should approach Mrs. J.E. Clements, the Divisional Home Help Organiser, at The Health Centre, 27, Bull Plain, Hertford (Tel: Hertford 3232).

Applications for this service should also be sent to Mrs. Clements. A charge may be made in accordance with the County Council's assessment scale.

Social Work Unit.

The East Herts Social Work Unit is established at :-
Westfield, West Street, Hertford. Telephone Numbers Hertford
3145 and 5875.

Divisional Social Worker	Miss HILDA WATSON
Senior Social Worker (Mental Health)	Mr. ROY BOHRER
Social Worker (Physically handicapped)	Miss PAMELA WATSON
Social Workers (Blind)	Miss D. TAYLOR Miss J. VAN RAAIJ

These workers cover the whole division, and all may be contacted via Westfield.

Other workers carry a wide range of work, ranging through mental illness, mental handicap, general welfare and physical handicap. All workers may be contacted via Westfield, if not available locally. The geographical areas covered are as follows :-

Cheshunt U.D.C.	Mr.K.R.Cockman (Ass.Divisional Welfare Officer).
	Mr. Gray
	Mrs. Stroud
	Miss Eeuwens
Hoddesdon U.D.C.	Mrs. Wright
	Mr. Gray
	Mrs. Stroud
	Miss Eeuwens
Ware U.D.C.)	
Ware R.D.C.)	Mrs. Wright
Hertford Borough)	Mrs. Page
Hertford R.D.C.)	Mrs. Ebeling
Bishop's Stortford U.D.C.)	Mrs. Luckman
Braughing R.D.C.)	Mrs. Marshall
Sawbridgeworth U.D.C.)	Mrs. Hewish
	Mr. Cockman.
Chestnuts Day Nursery,)	
Crossbrook Street,)	Mr. Gray
Cheshunt (Tel: Waltham Cross 20905))	Mrs. Stroud
Health Centre,)	Mrs. Luckman
Bishop's Stortford.)	Mrs. Marshall
(Tel: Bishop's Stortford 2743)	Mrs. Hewish

Anyone not sure which social worker to contact, should refer mental health problems to Mr. Bohrer, and welfare problems to Miss H.Watson.

All emergency calls should be referred direct to Westfield, where they will be dealt with by the duty officer for the day, irrespective of area.

School Medical Service.

During the latter part of 1968, preliminary steps were taken to replace the routine medical examinations in schools at certain ages by the examination of all pupils during the first year in an Infant School, and then selection for further examinations on the basis of the medical history or at the request of parents and Head Teachers, following information received on questionnaires.

These changes were to be based upon a three year trial arrangement on those lines, which was successful in the Mid-Herts Division. It was proposed that the new selective medical examination scheme should, in 1969, be implemented throughout the County.

Infant Schools.

Entrants to Infant Schools will have a full medical examination towards the end of the second or during the third term at school. Details of all new entrants are submitted to the Divisional Health Office at County Hall. Later Head Teachers will receive a list of children to be examined with a supply of letters/questionnaires for the parents to complete and return to the school. In addition a supply of questionnaires will be provided for completion by teachers. The replies to the questionnaires will be retained at the school to be available for Medical Officers when carrying out the medical examinations. After the first inspection children with defects requiring treatment will be referred to the family Doctors or to an appropriate Clinic, and those for observation will be recorded for seeing again as re-inspections at suitable intervals.

If the Head Teacher requires any other children to be seen by the School Medical Officer details are submitted in order that the medical records can be forwarded to the school.

Junior Schools.

No routine examination will take place in Junior Schools under the new scheme, though children with defects for which they are under observation will be seen as re-inspections, and any child about whose health or progress the Head Teacher is anxious, can have a special examination by arrangement, the parents being informed by Head Teachers accordingly.

Secondary Schools.

The 12 year old medical examination will be discontinued. In its place parents and Head Teachers will be asked to complete a questionnaire during the second term of a child in a secondary school.

School Medical Service (Continued).

The Leaver Examination.

This is to be replaced by a consultation with the Medical Officer, and it is felt that this should be arranged in the pupil's fourth year as at present during the terms preceding Easter and Summer. A list of pupils who by their date of birth are eligible to leave will be sent to the school together with a supply of the appropriate notices and questionnaires for the parents to complete and return to the school accordingly.

HOSPITAL SERVICES.

The Area is served chiefly by the County Hospital, Hertford, the Herts. and Essex Hospital, Bishop's Stortford and the Lister Hospital, Hitchin.

Chronic sick can receive treatment at Western House Hospital, Collett Road, Ware, and in what is known as Part III accommodation, Western House - not the hospital - provides beds under the National Assistance Act, 1948. As was reported in the Annual Report of 1967, the hospital was closed on the 1st April 1968, and 30 female patients were transferred to the East Herts Hospital, Block 5, where they were looked after by Western House Nursing Staff. The male patients were absorbed into other hospitals of the group.

The closure was due to rebuilding, and extensive renovations and when the hospital is reopened, probably in the summer of 1969, the bed accommodation will be raised from 87 to 91. Both the hospital and the Part III accommodation tend to concentrate upon psycho-geriatric patients and it is hoped to open two rooms in the Part III portion where special care may be devoted to such cases.

Patients suffering from infectious diseases can be treated either at St. Ann's Hospital, Tottenham (Tel.No. STAMford Hill 0121) or Highlands Hospital, Wynchmore Hill, London N. 21 (formerly South Lodge Hospital, World's End Lane, London N.21.) (Tel.No. 360 8151).

GENERAL PRACTITIONER MEDICAL SERVICES.

Braughing Rural District is served by 6 General Practitioners, all of whom work in partnerships. To these are attached Health Visitors/District Nurses/Midwives, a scheme which has been in operation some years. The attachments are proving very successful.

HEALTH VISITORS AND NURSES.

Health Visitors are State Registered Nurses who are in addition State Certified Midwives holding either Part I or Parts I & II of the Certificate. They have also had a year's training in Child health and welfare, public health and social legislation. While their main function is the care of Mothers and young children they are also concerned with school health and the care of the elderly and chronic sick. There are 4 DN/HV/N and also 2 part-time in the Braughing Rural District.

HEALTH VISITORS AND NURSES (CONTINUED.)

District Nurses can also be attached to family doctor practices. The District Nurse is a State Registered Nurse who has also obtained the Certificate of the Queen's Institute of District Nursing or the National Certificate in District Nursing. She provides for care of patients in their own homes.

Midwives must hold Part I and Part II of the Certificate of the Central Midwives Board.

DENTAL SERVICE.

There is one Dental Surgeon in practice in Buntingford. The District is also served by Dental Surgeons in adjoining localities.

OTHER SERVICES.

There is a Club for Old People at Buntingford, and also at Braughing.

Women's Institutes are active at 15 centres in the District.

CARE AND AFTER CARE.

Applications for recuperative holidays, if recommended by the Medical Attendant, should be made to the County Medical Officer.

Equipment can be issued on loan to patients being nursed at home. Medical Loan Depots have been established at Braughing, Buntingford and Much Hadham. A charge may be made for both of the services.

AMBULANCE SERVICE.

There are Ambulance Stations at Hertford, Buntingford, Bishop's Stortford and at Ware. Except in emergency an ambulance should be ordered by a Medical Practitioner.

DAY NURSERIES.

There are no Day Nurseries in the Braughing Rural District. There is a part-time Nursery School in Buntingford and a Play-Group in Hornead, and also a Play-Group at Cottered.

S E C T I O N "C".

SANITARY CIRCUMSTANCES OF THE AREA

REPORT OF THE PUBLIC HEALTH INSPECTOR

FOR THE YEAR 1968.

Mr. Chairman and Councillors.

I have pleasure in presenting my Annual Report for 1968.

Total inspections recorded	1268
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Housing

Housing inspections	84
Housing survey	324
Improvement Grants	52
Tenancy Selection	159
Housing - overcrowding	3

Food and Food Premises

Premises Inspected	31
Licensed Premises inspected	44
Meat Inspections	119
Slaughterhouse Inspections	2
Unsound Food	31

Water Supply

Inspections and sampling visits.	115
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Infectious Diseases

Visits and investigations	14
Long Stay Immigrants	2

General Sanitation

Complaints	76
Caravans	11
Offices, Shops and Railway Premises Act	18
Factories	21
Outworkers	3
Pest Control	15
Petroleum Act	3
Night Soil Collection	70
Animal Boarding Establishments	21
Miscellaneous revisits.	50

In the following pages of this report I have outlined the work done during the year in respect of the above matters, and given a general resumé of the Sanitary Circumstances of the Area.

HOUSING.

New Building.

During 1968 a total of 188 houses were built by Private Enterprise.

No Council Houses were completed during the year but work was commenced on the erection of 26 houses and 6 bungalows.

Council House Modernisation.

Modernisation has proceeded well over the past few years and out of some 250 houses in the original programme by 1968 only 50 had not been dealt with.

No public sewer is available to serve these houses and due to adverse sub-soil conditions, detailed investigation of the sites involved has been called for to try to ensure that the septic tank drainage systems to be installed will prove effective. During the year 4 such schemes have been prepared to enable 18 more houses to be modernised and the work has been put out to tender.

Other Schemes are in the course of preparation which will provide the majority of the remaining houses with effective drainage installations.

Improvement Grants.

Applications for Improvement Grants were dealt with by the Public Health Inspector until February 1968, when as a result of re-organisation of duties, the Council decided that this work would, in future, be handled by the Surveyor and his staff.

During the year a total of 37 Applications were received and 2 Discretionary Grants and 32 Standard Grants were approved.

Housing Survey.

This survey, commenced last year, was continued and the results of inspections made in a further 5 parishes are tabulated below :-

Parish.	No. Sur- veyed.	Category No. of houses surveyed.					Bath	W.B.	W.C.	H.W.	Larder.
		1	2	3	4	5					
Albury	49	14	10	22	-	3	36	32	35	38	20
Anstey	49	15	15	16	-	3	39	40	42	40	24
Ardeley	33	9	5	16	1	2	14	13	14	16	18
Braughing	122	27	31	45	5	14	68	65	78	70	57
Hornead	70	27	12	29	-	2	53	48	57	52	44
Totals	323	92	73	128	6	24	210	198	226	216	163

The survey is intended to cover smaller prewar houses and serves to give a picture of the standard of housing in the area and affords the opportunity to seek improvements or where the property is badly sub-standard Representation under the Housing Acts is made and the property closed.

It will be noted that 7.4% of the houses surveyed fell into Category 5 i.e. unfit houses not considered worth repair.

Unfit houses.

A further 12 houses were Represented to the Council during the year in the following Parishes :-

Albury	1
Anstey	1
Ardley	2
Braughing	4
Buckland	1
Hornead	1
Little Hadham	2

Allocation of Council Accommodation.

The Waiting Lists of Applications for Council Accommodation continued to be maintained by the Public Health Department. Where necessary inspections are made to ascertain the Housing needs of applicants so that full information is available to the Estates Committee, who select tenants.

Investigations made during the year emphasised the under-occupation of many of the Council's houses and it is apparent that the building of one or two-bedroom units and the transfer of existing tenants to them will, in most parishes, provide a most useful contribution towards meeting the needs of the more urgent applications on the lists.

FOOD AND FOOD PREMISES.

General Inspections.

A total of 31 inspections were made, mainly of retail shops, and no legal action was taken against owners or occupiers of food premises.

Licensed Premises.

Further progress has been made with the provision of up to date sanitation at houses lacking such facilities. Works of improvement were carried out at 5 premises and one was closed this year. Out of 42 licensed premises in the District only 4 now need be regarded as seriously sub-standard. Of these, two are to be closed and schemes of improvement are being prepared for the other two.

Meat Inspection.

There are two private slaughterhouses in the District and all animals slaughtered in them were inspected.

	Cattle.	Sheep.	Pigs.	Calves.
Animals killed and inspected.	147	1031	153	15
Whole carcasses condemned	-	-	-	-
Carcasses of which some part or organ condemned.	48	24	40	1

No carcase or parts thereof were condemned for tuberculosis.

One carcase was submitted to refrigeration due to the presence of a cistircercus bovis cyst.

A sum of £50. 8s. Od. was recovered from slaughterhouse operators by way of charges for meat inspection.



Unsound Food.

The following was surrendered voluntarily as unfit for human consumption :-

	<u>Ton.</u>	<u>Cwt.</u>	<u>lbs.</u>
Meat at Distribution Depot.	1	1	76
Canned Meat		2	36
Poultry		15	42
	1	19	42

The following items were surrendered following flooding of licensed premises:-

65 doz. Bottles of beer.

65 gallons of barrelled beer.

693 bottles of wines and spirits etc.

3 gallons cask sherry.

78 doz. Minerals.

51 doz. packets of sweets and chocolates.



WATER SUPPLY.

The Mains water supply in the District is provided by the Lee Valley Water Company. During the year the Company reported that 344 bacteriological and 12 chemical water samples were taken from within the District and all of these were satisfactory.

There are 44 wells in use in the District and they supply 104 houses.

Routine bacteriological samples of these well supplies is undertaken and 78 samples gave satisfactory results whilst 55 were unsatisfactory. The somewhat high figure for unsatisfactory samples is largely accounted for by the torrential rainfall and flooding that occurred in September 1968. Following these freak weather conditions each supply was sampled and advice given regarding boiling of drinking water etc. until satisfactory results were obtained.

Type of water supply 31. 12. 68.

Parish	Houses supplied from mains.	Wells in use.	Houses supplied from wells.
Albury	166	-	-
Anstey	98	4	5
Ardeley	131	3	6
Aspenden	70	1	1
Braughing	355	5	22
Brent Pelham	58	-	-
Buckland	102	-	-
Buntingford	920	2	2
Cottered	173	2	4
Furneux Pelham	138	1	5
High Wych	174	9	17
Hornead	215	-	-
Little Hadham	306	4	11
Meesden	41	-	-
Much Hadham	563	4	13
Stocking Pelham	12	-	-
Thorley	97	2	2
Westmill	77	7	16
Wyddial	35	-	-
	3761	44	104

GENERAL SANITATION.

Complaints.

A total of 45 complaints were received and each was investigated. In 6 cases the complaints were unfounded or warranted no action and at the end of the year 6 complaints remained unresolved.

Summary of complaints dealt with :-

Accumulations of rubbish	8
Animals not kept properly	1
Dampness	2
Drainage defects	10
Foreign body in food	2
Housing defects	8
Rodents and other pests	4
Smoke and effluvia	3
Defective sanitary accommodation.	1

Offices, Shops and Railway Premises Act 1963.

There are 45 premises registered under this Act and 18 routine inspections were made. Upon registration an inspection is carried out and the owner notified of any contraventions found. Co-operation has been generally good and no legal action has been necessary to secure compliance with the Act.

Pest Control.

This work is carried out by a private Contractor on behalf of the Council and matters referred to him were dealt with satisfactorily. Once again rat infestations were particularly heavy in the last quarter of the year; 169 reports of rats in or around domestic premises were received and 6 requests for eradication of mice were also dealt with during the year.

Night Soil Collection.

Weekly collections continued to be made, by a contractor, from some 120 properties. This service is given to householders who are elderly or incapacitated and this year was extended to include all unmodernised Council houses.

Few additional requests for the service have been received from private householders and the number of Council houses needing a collection will diminish as modernisation proceeds.

Sewage Disposal.

Eleven of the nineteen parishes in the District are served by main sewerage and due to the national economic situation etc., no further schemes were undertaken for the remaining small parishes during the year.

Cesspools are emptied free of charge twice per year where the main sewer is not available to residential properties. Free emptyings for the sewered areas of Much and Little Hadham ceased on 31st March, 1968.

Refuse Collection.

A weekly collection of house refuse is made and this service is organised by the Council's Surveyor.

Tipping of refuse from this area and Bishop's Stortford Urban District is carried out at Hadham Towers, Much Hadham. This tip is controlled by Bishop's Stortford Urban District Council and refuse from the Braughing Rural District is disposed of there by agreement.

Animal Boarding Establishments.

There are 5 premises in the District registered under the Animal Boarding Establishments Act 1963, for the boarding of dogs and cats. One establishment closed during the year, due to a change in the owner's circumstances. Each of the premises registered has been regularly inspected and found to be satisfactorily maintained.

S E C T I O N "D".

FACTORIES ACTS - SUMMARY OF RETURN.

REPORT OF THE PUBLIC HEALTH INSPECTOR.

FOR THE YEAR 1968.

FACTORIES ACT .. 1961.

Prescribed particulars on the Administration of Factories Act, 1961.

Part I of the Act.

1. Inspections for purposes of provisions as to health
(including inspections made by Public Health Inspectors.)

Premises	Number on Register	Number of		
		Inspections	Written Notices.	Occupiers Prosecuted
(i) Factories in which S.1,2,3,4, and 6 are to enforced by Local Authorities.	4	1	-	-
(ii) Factories not included in (i) in which S.7. is enforced by the Local Authority.	27	19	-	-
(iii) Other premises in which S.7 is enforced by the Local Authority. (Excluding out-workers premises.)	-	-	-	-
	31	20	-	-

2. Cases in which DEFECTS were found.

Particulars.	Number of cases in which defects were found.				Number of cases in which prosecutions were instituted.
	Found.	Remedied.	Referred to H.M. Inspector.	by H.M. Inspector.	
Want of Cleanliness (S.1.)	-	-	-	-	-
Overcrowding (S.2.)	-	-	-	-	-
Unreasonable temperature (S.3)	-	-	-	-	-
Inadequate ventilation. (S.4).	-	-	-	-	-

Particulars	Number of cases in which defects were found				Number of cases in which prosecutions were instituted.
	Found	Remedied	Referred to H.M. Inspector	by H.M. Inspector.	
Ineffective drainage of floors (S.6)	-	-	-	-	-
Sanitary Conveniences (S.7)	-	-	-	-	-
(a) Insufficient	-	-	-	-	-
(b) Unsuitable or defective	4	-	-	-	-
(c) Not separate for sexes	-	-	-	-	-
Other offences against the Act (not including offences relating to Outworkers.	-	-	-	-	-
	4	-	-	-	-

PART VIII OF THE ACT
Outwork.

Sections 133 and 134.

Nature of Work	Section 133			Section 134		
	No. of outworkers in August list required by Section 133(1)(c)	No. of cases of default in sending lists to the Council	No. of Prosec- utions for failure to supply lists	No. of instances of work in un- whole- some premises	Not- ices served	Pro - secut- ions
Wearing apparel Making etc.	2	-	-	-	-	-
Curtains and furniture hangings	1	-	-	-	-	-
Furniture and upholstery	1	-	-	-	-	-
Total	4	-	-	-	-	-

